

Atty. Dkt. No. 035451-0166 (3704.Palm)

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Wong et al.

Title:

PRODUCT SELLING AND

PRICING SYSTEM AND

METHOD

Appl. No.:

10/001,580

Filing Date:

11/01/2001

Examiner:

Elisca, Pierre Eddy

Art Unit:

3621

## CERTIFICATE OF MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date below. Carolyn Rainis (Printed Name) (Signature) 01/25/05 (Date of Deposit)

## NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the Examiner in the Final Office Action dated October 26, 2004, finally rejecting Claims 1, 2, 5-20, 22 and 24-29.

| <br>l A | ppl | icant | claims | small | entity | status. |
|---------|-----|-------|--------|-------|--------|---------|
|         |     |       |        |       |        |         |

[ ] Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

## [X] Notice of Appeal Fee

[X] To be paid as detailed below

[ ]Not required (Fee paid in prior appeal)

01/31/2005 YPOLITE1 00000010 10001580

01 FC:1401

500.00 OP

The required fees are calculated below:

| [X] | Notice of Appeal Fee                           | \$500.00 |
|-----|--|----------|
| []  | Extension month:                               | \$0.00   |
| []  | Extension:                                     | \$0.00   |
|     | FEE TOTAL:                                     | \$500.00 |
| []  | Small Entity Fees Apply (subtract ½ of above): | \$0.00   |
|     | TOTAL FEE:                                     | \$500.00 |

- [X]A check in the amount of \$500.00 is enclosed.
- The Commissioner is hereby authorized to charge any additional fees which may be [X] required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Tanuary 25, 2005

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